	WELL	CONSTRUCT	OR'S REPORT	TO WISC	CONSIN STATE BOARD	OF HEALTH	I .
1,	County_	Osauka	حد	(To	wn Hage Meanor	<del>مــــه</del>	l
2.	· Location n. W/4 of n. W/4 Lec 34 Jour 10N Range 21 E						
3. Owner or Agent <u>hieman Stephanson</u>							
4. Address Ceclaiburg Wis							
5. Sewer - ft; drain - ft; septic tank -ft; disposal unit -ft; barn-yard - ft; abandoned well -ft; other -ft. Explain on obverse side.							
	DRILLHOLE OR EXCAVATION Dia. From To (in.) (ft.) (ft.)			CASING PIPE, LINER PIPE OR CURBING Dia.  (in.) Kind (ft.) (ft.)			<del></del>
	10	0	37	10	Stel W. Steels	0	//
<del></del>		37	165	1-6	Std W- Steel	0	37
<del></del>				· · · · · · · · · · · · · · · · · · ·	 		
	<del>"                                    </del>				f <del> </del>	· ·	ļ
<del></del>	·		<del></del>		<u></u>		
FORMATIONS							
	₩.	<del></del>	From	To		From	To
Kind		(ft.)	(ft.)	Kind	(ft.)	(ft.)	
Hard pan Linestones			1 (	Coments	0	37	
	Temes	stones		165			· · · · · · · · · · · · · · · · · · ·
<del></del>	<del>1 2 -                                  </del>	<del></del>		<del></del>	<u> </u>		
	- <del></del>	<del></del>		<del></del>			
				<del></del>		<u> </u>	<del></del>
<del></del>					Yield test: 5 Hrs. at 19 GPM.		
					To static water-level 9 ft.		
<del></del>					Drawdown <u>50</u> ft.		
				<del></del>	Water sample was sent to the		
				<u></u>	State Laboratory at Madison. Construction of the well was com-		
				<del> </del>	pleted on Lat. 16 1942		
					The well is terminated & incles		
				<del> </del>	(above)(below) the permanent grade		
				<del></del>	Was the well disinfected upon		
					completion? Yes V No		
					was the well sealed watertight		
				· · · · · · · · · · · · · · · · · · ·	upon completion? - Yes X No  This report was prepared by or under the supervision of:		
				•			
				- · <u>· · · · · · · · · · · · · · · · · ·</u>	Registered Well Driller		
					Permit No. 33 Date 11/24 1944		
		<del></del>	<u></u>	(over)	nrermit No.33 Da.	ce 11/24	_174 <u>4</u> _